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CONFIRMATION NO. 7778

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|---|---|------------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/535,730  | <b>FILING OR 371(c) DATE</b><br>01/03/2006<br><b>RULE</b>   | <b>CLASS</b><br>351                | <b>GROUP ART UNIT</b><br>3737   | <b>ATTORNEY DOCKET NO.</b><br>GK-ZEI-3274/500343.20294 |
| <b>APPLICANTS</b><br>Oliver Baumann, Aalen, GERMANY;<br>Michael Claus, Aalen, GERMANY;<br>Axel Doering, Jena, GERMANY;<br>Ingo Koschmieder, Jena, GERMANY;<br>Thomas Schulze, Oberkochen, GERMANY;<br>Bernd Spruck, Moegglingen, GERMANY; |   |                                    |   |  |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP03/12673 11/13/2003   |   |                                    |   |  |
| <b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 102 54 369.0 11/21/2002   |   |                                    |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance                    |   | <b>STATE OR COUNTRY</b><br>GERMANY | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>16                              |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____  |   |                                    |   | <b>INDEPENDENT CLAIMS</b><br>2                         |
| <b>ADDRESS</b><br>26418   |   |                                    |   |  |
| <b>TITLE</b><br>Ophthalmological appliance comprising an eye tracker  |   |                                    |   |  |
| <b>FILING FEE RECEIVED</b><br>1030  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |